



REPLY TO  
ATTENTION OF:

**DEPARTMENT OF THE ARMY**  
**HEADQUARTERS, US ARMY ARMOR CENTER AND FORT KNOX**  
**239 BINTER STREET**  
**FORT KNOX, KENTUCKY 40121-5202**

Expires 14 December 2008

IMSE-KNX-MWA

14 December 2006

**MEMORANDUM FOR**

Commanders, All Units Reporting Directly to This Headquarters  
Commanders, Fort Knox Partners in Excellence  
Directors and Chiefs, Staff Offices/Departments, This Headquarters

**SUBJECT: Fort Knox Policy Memo No. 50-06 – Reporting of Child Abuse in Department of Defense (DOD)-Operated or -Sanctioned Activities**

1. Reference. AR 608-18, The Army Family Advocacy Program, 30 May 2006.
2. Purpose. This policy memorandum establishes procedures for handling suspected child abuse cases occurring in DOD-operated activities (DODOA) or DOD-sanctioned activities (DODSA) on Fort Knox.
3. Applicability. This policy memorandum applies to all DODOA or DODSA on Fort Knox. DA policy is to provide a safe and secure environment for all Army personnel and their families, prevent out-of-home child abuse, and promote early identification and intervention in allegations of out-of-home child abuse in DOD-operated or -sanctioned activities (for example, Child and Youth Services (CYS) programs; Department of Defense Dependent Schools; DODESS; Chaplain's programs; Boy and Girl Scouts; and Morale, Welfare, and Recreation (MWR) programs).
4. Definitions.
  - a. DODOA. An activity involved in the care of children and operated by US Government employees. The care of children may be either its primary mission or incidental in carrying out another mission (e.g., medical care). Examples of DODOA are programs operated by CYS, to include the CDC, SAS, FCC, YS programs, and children/youth activities that may be conducted as a part of another Army DMWR Program.
  - b. DODSA. A non-governmental activity involved in the care of children on Army installations or in housing owned by the US Government (including on-post privatized housing). Examples include child care conducted by Army-regulated FCC providers or private organizations.
  - c. Department of the Army (DA) Reportable Child Abuse. All child abuse occurring in either a DODOA or DODSA requires reporting on a military police (MP) Serious Incident

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Report (SIR). Procedures established for reporting DOD-reportable child abuse are in addition to and do not supersede requirements outlined in AR 190-40. IAW AR 190-40, paragraph 2-3t, reportable child abuse includes:

- (1) Any actual or alleged child sexual abuse regardless of the nature of injury, if any.
  - (2) Any actual or alleged child abuse resulting in the death of a child or which causes major physical injury.
  - (3) Any actual or alleged child neglect involving the deprivation of necessities that is determined to be widespread, chronic, or potentially life threatening.
- d. The DA Family Advocacy Regional Rapid Response Team consists of specially trained social workers, criminal investigators, and pediatricians who can deploy to installations at the commander's request within 48 hours of notification.
- e. DOD Family Advocacy Command Assistance Team (FACAT). The DOD has multidisciplinary response teams with specific technical skills that deploy to installations at the commander's request and provide assistance with out-of-home child sexual abuse cases that meet at least one of the following conditions:
- (1) Existing resources are not adequate to conduct the investigation and/or manage the case.
  - (2) The case creates alarm in the community and/or generates extensive media coverage.
- f. The report point of contact (RPOC) is the MP desk, which receives all reports of spouse and child abuse and notifies the appropriate authorities with regard to such reports. The MP desk maintains a 24-hour telephone to facilitate reporting.
- g. For other definitions, see AR 608-18, The Family Advocacy Program.

## 5. Responsibilities.

- a. All personnel cited in paragraphs 4a and 4b of this policy memorandum will carry out their responsibilities as outlined in this policy and their respective regulations, standing operating procedures, or contracts.
- b. In suspected cases of child abuse in DODOA and DODSA, the following people will perform these additional duties:

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(1) Family Advocacy Program Manager (FAPM) will serve as the action officer; coordinate the installation response plan; serve as the point of contact for all cases; maintain up-to-date status of cases; serve as liaison between the command, medical treatment staff, and community; and coordinate and staff command letters to parents and staff.

(2) The RPOC will immediately notify the FAPM; Chairperson, Case Review Committee (CRC); and MP/Criminal Investigation Division (CID).

(3) The Chairperson, CRC, will perform an Army Central Registry check of any alleged perpetrators; work with the MP/CID to determine the credibility of any allegation; keep the FAPM informed of all available information; submit a DA Form 7517 to the Army Central Registry; and coordinate medical examination and treatment.

(4) The MP/CID will immediately investigate any allegation and provide the Chairperson, CRC; Coordinator, CYS; and the FAPM with all appropriate information regarding a case's credibility. MPs will transport children to Ireland Army Community Hospital (IACH) for medical assessments upon request by the Chairperson, CRC. When cases require the submission of an SIR, RPOC will immediately forward a copy of this report to the FAPM and Chairperson, CRC, for reporting purposes.

(5) The CID and Public Affairs Office (PAO) will work closely with the DODOA/DODSA concerned to prepare a media response plan for information released to the public in any instance of reported child abuse that may arouse community concern.

(6) The IACH will perform medical examinations, as appropriate, or refer the patient to a civilian emergency room. The purpose of a medical examination is to identify trauma or other conditions that require medical attention, collect evidence, and reassure the child and parents. Counseling services to the victim and the victim's family will be provided through Social Work Services (SWS), or appropriate referrals will be made to off-post services.

(7) Directors DODOA or DODSA at division chief level or higher will develop internal reporting procedures for all suspected instances of child abuse or infractions of rules relating to the care of children; post reporting procedures and telephone numbers in the activity; and notify the RPOC and the FAPM of an alleged child abuse report. In addition, the Coordinator, CYS, will coordinate with the appropriated/non-appropriated Civilian Personnel Advisory Center and initiate a plan of corrective action or measures to be taken within the facility to assure the safety of children, to include reassignment of the suspected offender to an administrative position pending completion of the investigation. The activity director will take appropriate disciplinary action, where necessary, for alleged abuse cases that are considered a policy violation. The Coordinator, CYS, will submit the corrective action or disciplinary plan to the CRC.

## 6. Procedures.

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a. All allegations of child abuse in a DODOA/DODSA will be immediately reported when identified by either activity staff or an outside person to the RPOC at 624-2111. If the report is made by activity staff, that person will also inform the FAPM at 624-4528 that a report has been made.

b. The RPOC will ensure notification of the Chairperson, CRC, at the SWS, phone 624-0255/9839; FAPM at 624-4528; and the appropriate DODOA/DODSA director. If the report occurs after duty hours, the RPOC will notify appropriate personnel through their home telephone numbers.

c. The investigative agency will notify parents or guardians of the alleged victim and inform them of the reporting and investigating procedures.

d. The Coordinator, CYS, will take immediate corrective action to assure the safety of children; provide access to administrative records and staff; and observe and note signs and symptoms in other children that may aid the investigation or uncover other victims.

e. The FAPM, CID, and MPs will notify the Garrison Commander, through the chain of command, that a report has been made and what action is being taken. Depending on the nature and severity of the offense, either MP or CID will investigate. Investigators will coordinate with the Staff Judge Advocate and/or Assistant US Attorney, as appropriate; Chairperson, CRC; and FAPM during the investigation. These personnel will also consult with the Director, DODOA/DODSA, and Coordinator, CYS, to promptly determine whether a report of abuse is credible.

f. After the initial investigation, the following actions will be taken:

(1) If the report is determined not credible or a violation of policy rather than abuse, the Chairperson, CRC, will make a written record of the information and send it to the Director, DODOA/DODSA, who will be responsible for correction.

(2) If the report is determined to be credible and Headquarters, Department of the Army (HQDA) reportable, a complete child abuse investigation will proceed. Reports and notifications will be made as follows: Within 48 hours of the determination of a credible report of DA Reportable Child Abuse in DODOA/DODSA, the FAPM will telephonically provide the information to the Garrison Commander, if not already contacted by the MPs, and then to the Southeast Region Army Community Service, who will inform HQDA FAPM. A regional SIR (Encl 1) will be forwarded to the regional office as soon as possible. This report will be followed, within 5 work days, by a written report through the Garrison Commander.

(3) The following telephonic follow-up reports will be made through the installation FAPM to the Southeast Region Office (SERO):

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(a) When significant changes occur, e.g., the arrest of a suspect, dismissal of pending criminal charges, and/or firing of an employee.

(b) When required by SERO.

(c) When significant changes develop, resulting in increased community sensitivity.

(4) The FAPM will submit a written follow-up/interim report followed by a written closeout report that is required after all investigations have been completed. This submission does not need to be delayed until the submission of a final law enforcement report or the completion of related briefs or appellate review.

(5) If the report identifies the probability of multiple victims or the potential for alarm in the community, the command will consider the activation of the Family Advocacy Strategy Team, the DA Family Advocacy Regional Rapid Response Team, and the DOD FACAT. In such cases, the FAPM and a liaison from the activity involved will work with the PAO and CID to prepare statements for release (which will be approved by the Garrison Commander and the strategy team if it is activated).


g. Necessary medical/therapeutic assessment and treatment will be arranged. Any person with a complaint of child abuse in a DODOA/DODSA will be considered a medical emergency and will be seen at IACH or other appropriate facility. If not otherwise eligible as a military family member, the patient may be treated in accordance with policies and procedures applicable to any civilian patient.

7. Media Contact. Individuals who receive queries from representatives of news media will forward queries to the Garrison PAO for response. Interviews of individuals and/or visits to facilities by representatives of the news media will be arranged in advance with Garrison PAO.

8. This Fort Knox Policy Memorandum will be revised and updated, as needed.

FOR THE COMMANDER:

Encl

  
MARK D. NEEDHAM  
COL, AR  
Garrison Commander

DISTRIBUTION:

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